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THE BRITISH JOURNAL OF NURSING

WITH WHICH IS INCORPORATED

THE NURSING RECORD

NO. 1,521. VOL. 58. [Registered at the General Post Office as a Newspaper] MAY 26TH, 1917 WEEKLY TWOPENCE.

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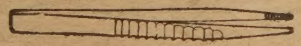

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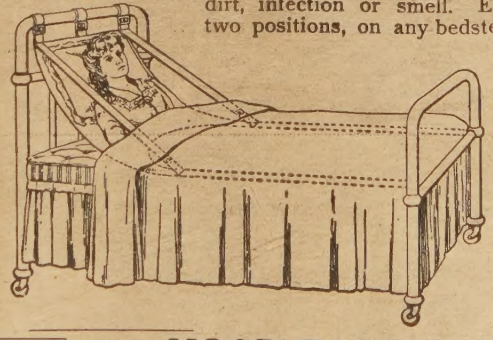

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The Society for the State Registration of Trained Nurses

431, OXFORD STREET, LONDON, W.

Petition to the Prime Minister.

I, the undersigned, petition that any Bill for the State Registration of Trained Nurses, brought in by the Government, or otherwise, shall provide for the direct representation of the Organised Societies of Nurses in England and Wales, Scotland, and Ireland on the Provisional Governing Body authorised by Parliament to frame the Rules and Regulations to which the Registered Nurses will have to conform, as provided in the Bill drafted by the Central Committee for the State Registration of Nurses.

Signature .....

Certificate .....

Professional Position .....

Permanent Address .....

.....

N.B.—Please return this form, when signed and filled in, to the Hon. Secretary, Nurses' Petition, 431, Oxford Street, London, W. 1.

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Editorial Communications to be addressed to the Editor, 20, Upper Wimpole Street, London, W. 1.

N.B.—*All communications in respect to Advertisements or business matters must be addressed to The Manager,* THE BRITISH JOURNAL OF NURSING, 431, Oxford Street, London, W. 1.

Phone—1712 Gerrard.

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Applicants must not be more than 40 years of age, must be fully trained nurses and competent managers.

Applications, stating age, experience, copies of three recent testimonials (including one from last post held) to be sent to ithe HON. SECRETARY, not later than Tuesday, June 5th, 1917.

Canvassing will disqualify. 108

EBBW VALE WORKMEN'S SURGICAL HOSPITAL.

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MATRON. Salary £60 per annum, rising by £5 annually to £70.

SISTER. Salary £45 per annum.

ASSISTANT NURSE (alternate Day and Night Duty). £32 10s. per annum.

In addition to the above salaries, a War Bonus of £3 10s. per annum is paid. Indoor Uniform is provided in each case.

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WANTED, a NURSE MATRON, capable of organising a new Home for Convalescent Mothers and their Babies.

Must hold C.M.B. Certificate, and be experienced in care of infants.

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Apply Mrs. SHAKESPEAR, Citizens' Committee, Council House, Birmingham, sending particulars of experience and training, and copies of three recent testimonials. 111

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STAFF NURSE. Salary £28 to £32, increase £2 10s. annually, and Uniform.

Also PROBATIONERS, educated. Two years' training. Certificate. £15 and £18, with Uniform.

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HOSPITAL AND POOR LAW VACANCIES ETC.—*continued.*

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WARD SISTER AND STAFF NURSE REQUIRED.

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Ward Sister must be a trained certificated Nurse, with previous experience as a Ward Sister. Strict disciplinarian essential.

Staff Nurse must also hold a certificate of three years' training.

Salary for Ward Sister £50 per annum, rising by annual increments of £5 to a maximum of £65 per annum. Staff Nurse £40 per annum, rising by annual increments of £2 10s. to a maximum of £45. The usual gratuity and allowances are payable in each case.

Applications, in candidates' own handwriting, giving full particulars, together with copies of not more than three testimonials, must be sent to Miss L. A. PARSONS, Matron, Croesnewydd Auxiliary Military Hospital, Wrexham, immediately.

By Order,
J. G. LOWE,
Clerk to Committee.
10, Temple Row, Wrexham,
14th May, 1917. 124

PERTH WAR HOSPITAL.

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Candidates must hold a three years' certificate from a recognised Training School.

Applications, stating age, experience, &c., with copies of three recent testimonials, including one from a Matron, should be sent to the MATRON.

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Perth War Hospital, Glasgow Road, Perth 119

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Applications are invited for appointments of WARD SISTERS at the Selly Oak Infirmary, Birmingham.

Salary £38 per annum, increasing to £42 per annum on approved service, with residence, rations, uniform, and laundry. During the war an extra payment of £10 per annum will be made.

Candidates must be trained certificated nurses with at least four years 'nursing experience, and capable of training probationers.

Apply at once, enclosing stamped addressed foolscap envelope, for forms of application, to the MATRON at the Infirmary.

R. J. CURTIS.
Union Offices, Clerk
Edmund Street,
Birmingham,
22nd May, 1917. 120

HOSPITAL AND POOR LAW VACANCIES ETC.—*continued.*

KENSINGTON BOARD OF GUARDIANS.

MASSAGE SISTER.

REQUIRED, a MASSAGE SISTER for the Infirmary. She must be between 25 and 35 years of age, a trained and certificated Nurse, and experienced in training pupils for the I.S.M. Certificate. Salary £55 per annum, with an additional £12 per annum War Bonus, payable monthly, with Board, Lodging, Washing and Uniform. The appointment will be subject to the provisions of the Poor-Law Officers' Superannuation Acts, 1896 and 1897. Applications to be made (at once) by letter, with testimonials, to the MATRON of the Infirmary, Marloes Road, Kensington, W.

May 16th, 1917. 112

MASSEUSE REQUIRED. Certificated I.S.T.M. (non-resident); to give whole time. Preference given to applicant qualified to teach. Salary commencing £100. Apply, MATRON, Royal Orthopædic and Spinal Hospital, Newhall Street, Birmingham. 102

YORK UNION.

HEAD NIGHT NURSE.

WANTED, a HEAD NIGHT NURSE for the York City and District Infirmary, with three years' training in a Hospital or Poor Law Infirmary, and a C.M.B. certificate.

Salary £40 per annum, with Apartments, Board, Laundry, and material for indoor Uniform.

Applications, upon forms to be obtained at my Office, by sending stamped, addressed foolscap envelope, must be returned not later than the 29th May.

GEO. SYKES,
Union Offices, Clerk.
Museum Street,
York. 110

MANCHESTER UNION.

WANTED at the Nell Lane Military Hospital, West Didsbury, Manchester, TEMPORARY STAFF NURSES.

Salary £40 per year, together with board, residence, &c.

Application to be made to MISS SMITH, Hospital Matron. 118

TO NURSES.—Please send for our List of important "Books for Nurses." It contains full particulars of valuable handbooks by Miss Dock, Miss Pope, Miss Maxwell, and others.
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For further information apply to the Secretary—

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PROBATIONER (LADY) REQUIRED. Age 18–21 years.

Salary, first year, £12.

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Age 21 to 33 years.

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The Infirmary is a registered Training School for the Central Midwives Board.

R. J. CURTIS,
Clerk.

Union Offices,
Edmund Street, Birmingham,
22nd May, 1917. 121

PARISH OF READING.

PROBATIONER NURSES WANTED at the Poor-Law Infirmary.

Candidates must be well educated, strong and healthy, and over 21 years of age.

Salary, £15 a year for the first year, £20 for the second, and £25 for the third (if the duties are satisfactorily performed); with Board, Washing and Indoor Uniform.

A certificate is granted at the end of two years' training, but the full certificate (which qualifies for the position of SUPERINTENDENT NURSE) is not given until an examination is passed and three years' training is completed. In addition to the lectures given to Probationers by the Superintendent Nurse and Medical Officer, Probationer Nurses attend a course of lectures at the Royal Berkshire Hospital, where they also sit for their examination.

Forms of application can be obtained from the Master, 342, Oxford Road, Reading, or will be forwarded on receipt of stamped addressed foolscap envelope, and must be returned not later than 10 A.M. on SATURDAY, 26th May, 1917.

By Order of the Board,
W. H. OLIVER,
Clerk to the Guardians.

32, Thorn Street, Reading.
19th May, 1917. 125

HOSPITAL AND POOR LAW VACANCIES ETC.—*continued.*

BOROUGH OF CHEPPING WYCOMBE.

APPOIN TMENT OF HEALTH VISITOR

Applications are invited for the post of HEALTH VISITOR.

Preference will be given to persons holding the Certificate of the Central Midwives Board and the Health Visitors Certificate of the Royal Sanitary Institute, and have had nursing experience.

Salary £100 per annum and the person appointed must devote whole time to the duties.

Applications, endorsed "Health Visitor," stating age and experience, enclosing copies of not more than three recent testimonials, to be forwarded not later than Saturday, June 2nd, 1917, addressed to the MEDICAL OFFICER OF HEALTH, High Wycombe.

A. J. CLARKE,
Town Clerk.

Easton Street,
High Wycombe. 109

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Salary, including special allowances, at the rate of £121 10s. per annum, and bicycle will be provided.

Applicants must be trained nurses holding the Central Midwives Board certificate, also a certificate from the Royal Sanitary Institute, in preference to that of Sanitary Inspector.

Applications must be made on the forms which will be supplied, together with a list of the duties, by the MEDICAL OFFICER OF HEALTH, Guildhall.

Applications, together with copies of three recent testimonials, must be received not later than 30th May. 126

APPOINTMENTS VACANT.

WORKING CHARGE NURSE. Disciplinarian; able to train probationers. Age about 30. Salary £40 and Uniform. Send full particulars and enclose recent photo. and testimonials to MATRON, Fever Hospital, Great Yarmouth. 117

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THERE are vacancies for well-educated PROBATIONER NURSES. Two years' training. Salary £10–£14. Apply to the MATRON, Moseley Hall Convalescent Hospital for Children, Moseley, Birmingham. 116

LITERARY CONTRIBUTIONS

Contributions to the Editor should be addressed to her at

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Phone—513 Mayfair.

APPOINTMENTS VACANT.—*continued.*

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THE
BRITISH JOURNAL OF NURSING
WITH WHICH IS INCORPORATED
THE NURSING RECORD
EDITED BY MRS BEDFORD FENWICK

No. 1,521. SATURDAY, MAY 26, 1917. Vol. LVIII.

EDITORIAL.

NATIONAL BABY WEEK.

To save the babies. Could any appeal be more irresistible? The babies themselves are so helpless, so sweet, so appealing, that if we realize the facts which are constantly presented to us in somewhat dry statistics we should not tolerate for a day the appalling holocaust of infant life which is going on around us, but would rise up and demand that conditions should be so altered that the babies born and unborn shall have a fair chance of life and happiness, instead of only one child in ten getting the proper care.

It is the right of the babies, and it is the right of the nation that they should be born healthy, and should grow up healthy. At the present time many babies die even before they are born, many more die before they are a year old, and of those who survive and grow up to maturity many are physically and mentally defective, instead of being healthy in mind and body. So it is well that the National Baby Week Council, of which the Prime Minister is President and Lord Rhondda Chairman, should have sounded the call to arms for a holy war on behalf of the helpless little ones who cannot plead for themselves, and that a National Baby Week is to be held from July 1st to 7th. It therefore behoves every one to consider his or her responsibility, in this matter, and how they can co-operate with those who are already at work to make the week a success, or whether they can start fresh centres of influence.

The Head Quarters of the National Baby Week Council are at 6, Holles Street, Oxford Street, W. 1, and the Secretary is Miss Alice Elliott. Those desiring information cannot do better than secure some of the attractive and illuminating literature published about the arrangements.

The immediate objects are: (1) To arouse the sense of racial responsibility in every citizen, in order to secure to every child born in the United Kingdom a birthright of mental and bodily health. (2) To explain, assist, and extend the work of the various Children's and Mothers' Welfare Societies. (3) To promote the immediate provision of additional Crèches, Visitors, Mothers' Schools and Maternity Centres. (4) To assist in the combating of Disease, Ignorance, Carelessness, and the evils arising from improper conditions. (5) To raise a large and adequate fund for achieving these aims and objects with the least possible delay.

The Council are appealing for the help of the clergy, teachers, parents, and all citizens. The clergy are invited to preach special sermons on Baby Sunday, to take an active part in the Local Baby Week Campaign, to give special talks to Sunday School Scholars, to devote collections to infant welfare work, to insert notices in Parish Magazines, to secure the co-operation of social workers, and to get into touch with the Local Health Authority. Teachers are invited to organize visits of girl pupils to Mothercraft Exhibitions, and to Cinemas where Baby Films are shown, a most attractive set of films are being prepared for this purpose, to hold playground meetings for parents, to arrange for their pupils to distribute Baby Week literature, and to organize plays and entertainments to raise funds.

Much of the success of the movement will depend on the speakers at meetings, and a series of lectures to speakers has been arranged at 52, Berners Street, W., commencing on May 30th, at 5.30 p.m., when Mrs. H. B. Irving will speak on the object, programme, and general policy of the crusade and what to say to a general audience before and during Baby Week.

OUR PRIZE COMPETITION.

DESCRIBE THE ABDOMINAL COMPLICATIONS OF ENTERIC FEVER, AND GIVE AN ACCOUNT OF THE METHODS OF NURSING EMPLOYED IN THESE.

We have pleasure in awarding the prize this week to Miss Doris Saddington, Western Hospital, Seagrave Road, Fulham, S.W.

PRIZE PAPER.

The abdominal complications of enteric fever may be briefly tabulated as follows :—(1) Obstinate constipation; (2) excessive diarrhœa; (3) tympanites; (4) hæmorrhage from bowel; (5) perforation of bowel; (6) peritonitis; (7) cholecystitis; (8) cystitis; (9) nephritis.

1. *Obstinate Constipation.*—Cause, loss of "tone" of lower bowel, causing (*a*) bowel to become flaccid and weak; (*b*) peristaltic movements to be irregular.

Treatment.—Enemata saponis, given at the same hour daily. Aperients, owing to nature of disease, are not advisable.

2. *Excessive Diarrhœa.*—Corresponds to amount of intestinal ulceration; serious drain upon patient's strength.

Treatment.—Nothing but sips of water for twenty-four hours; then albumen-barley water for a day or two before resuming diet. A starch and opium enema will procure rest for bowel and patient. Mixtures containing chalk or bismuth are sometimes ordered, or a Dover's powder.

3. *Tympanites.*—Name applied to drum-like condition of abdomen resulting from distension of bowels with gas. Condition serious; intestinal walls have already become very thin due to ulceration; distension may cause perforation.

Treatment.—Passage of rectal tube will allow the escape of gas. Should this prove insufficient, a turpentine enema may be ordered.

4. *Hæmorrhage from Bowel.*—Cause, ulcer eating into a blood vessel. May be recent when colour is bright, or may have taken place some time previously to evacuation from rectum when colour is "tarry."

Symptoms.—Hæmorrhage in stools is often the first symptom; occasionally, however, a warning is given by a sudden drop in temperature and an anxious expression on patient's face. The fourth week of the disease is the most likely period for this complication to occur.

Treatment.—Nothing but sips of water until a doctor arrives, when he may allow sips of iced milk. Cradle bedclothes, apply ice-bag to abdomen, raise foot of bed upon blocks. Patient's body must not be raised from bed upon any pretext; an absorbent pad upon an old piece of mackintosh placed under buttocks will replace bed-pan. A large dose of morphia (hypodermically) may be ordered, and will give repose. Stimulants must *never* be given, as they increase the blood pressure.

5. *Perforation of Bowel.*—Due to two causes :—(*a*) An ulcer eating through peritoneal covering; (*b*) sudden tympanitis tearing through thinned tissues.

Symptoms.—Abdominal pain, quickened pulse, anxious expression of face, liver dulness, fall of temperature. Sometimes perforation may occur suddenly without any previous symptoms.

Treatment.—Prompt laparotomy and the repair of the perforation in the intestine is the only hope. Peritonitis of a severe type usually follows perforation.

6. *Peritonitis.*—Caused by (*a*) perforation of bowel; (*b*) absorption of bacilli from intestine.

Symptoms.—Rigor, intense abdominal pain, increased by movement or pressure; respiration costal, coughing restrained; abdomen distended, tense, tympanitic; pulse rapid, small, and hard; rapid rise of temperature (104° to 105° F.), occasionally no fever; vomiting; urine scanty and high coloured; micturition painful. Patient has wasted appearance, face pinched, eyes sunken and anxious. Liver dulness reduced or obliterated.

Treatment: Internally.—Ice. Saline infusions are often helpful. Calomel (combined with opium) in small doses is sometimes ordered.

Locally.—Turpentine stupes, leeches, ice compresses, ice-bag—possibly laparotomy and drainage.

Feeding by nutrient enemata. Morphine is usually given (hypodermically) to deaden pain.

7. *Cholecystitis.*—Inflammation of gall-bladder. Serious, as several complications are apt to follow, *i.e.*, jaundice, cholangitis, gall-stones.

Cause.—Infection travels up the common bile duct from duodenum to gall bladder, there causing inflammation, catarrh, suppuration.

Symptoms.—Pain and tenderness beneath the margin of ribs (right side), shivering, fever, often delirium; jaundice in twenty-four to forty-eight hours after commencement of pain.

Treatment.—Operation to drain gall bladder of suppurating contents, after which recovery usually follows.

8. *Cystitis.*—Inflammation of bladder.

Cause.—(*a*) Infection from intestines; (*b*) general weakening of system.

Symptoms.—Pain in pelvis or lumbar region, frequent micturition. Urine turbid, whitish sediment, foul odour.

Treatment.—Application of heat to pelvis. A "bladder washout" may be ordered if pus is present in the urine.

Drugs.—Urotropin, salol, benzoate of ammonium, which lessen decomposition in the urine, are often employed.

9. *Nephritis.—Cause:*—Toxin circulating in blood causes congestion of malpighian bodies in kidneys.

Symptoms.—Pain in lumbar region; vomiting; varying amount of dropsy; urine diminished or scanty, dark or smoky in colour; contains a large quantity of albumin. Death may follow from uræmia.

Treatment.—Practically the same as for any case of nephritis, but modified to suit the individual case. The method chosen to produce diaphoresis would probably be radiant heat, as this would necessitate the least amount of movement for the patient.

The diet would require little alteration.

Owing to the ulcerated condition of bowel, saline purgatives might have to be omitted.

Drugs.—Digitalis and strophanthus may be ordered, as they increase the flow of urine.

HONOURABLE MENTION.

The following competitors receive honourable mention:—Miss A. M. Johnson, Miss Dorothy M. Williams, Miss J. Edmondson, Miss P. Tomlinson.

QUESTION FOR NEXT WEEK.

Explain what is meant by blood pressure.

VENEREAL DISEASES IN WOMEN.

A USEFUL PAMPHLET.

The National Council for Combating Venereal Diseases (Bank Buildings, Kingsway, London, W.C. 2) has published a pamphlet entitled "An Outline of the Medical Treatment of Venereal Diseases in Women," by Mrs. Scharlieb, M.D., M.S., and Miss Morna M. Rawlins, M.B., B.S.Lond.

The pamphlet is intended primarily for members of the medical profession, but would also be of use to nurses, on whom falls the duty of carrying out medical directions. Thus, in relation to syphilis, a list of drugs used intravenously is given, with the usual dose given to women. Some are administered by the tube and funnel method, others with a syringe. If intravenous injections of the preparations named are not possible, arsenic can be injected intramuscularly. A special preparation of galyl, we are told, gives very good results. Usually a course of six injections is given, together with mercury for three months. The patient should continue to be under observation for at least two years after the Wassermann reaction becomes negative, and blood tests should be repeated about every three months during this time.

Mercury can be given in the following ways: (1) Inunction—by ung. cinereum—this being a most excellent method when properly carried out, as the patient is quickly got under the influence of the drug without digestive troubles arising. (2) Rectal suppositories. (3) By the mouth, in the form of pills or mixtures. The disadvantage of this method is that the digestive system may become badly disturbed. (4) Intramuscular injection. This method has the advantage of not interfering with the digestion, and, when given, the patient has received her mercury for a week, for certain, a fact which one cannot be sure of when a bottle of medicine, or a box of pills, is taken home.

Contra indications to arsenical intravenous treatments are *absolute* in (1) Hæmophilia. (2) Addison's Disease. (3) Advanced organic disease of liver, heart, or kidneys, if not due to syphilis. *Relative* in (1) Albuminuria. (2) In heart and nerve lesions it is advisable to give very small preliminary doses. (3) In pyrexia, wait if possible until the temperature is normal. (4) If the patient shows signs of intolerance . . . such signs may be headache, pyrexia, diarrhœa, vomiting, loss of weight, jaundice, and arsenical dermatitis.

Preparation.—The preparation is similar to that for an operation. The bowels must be well opened the morning of the injection, and nothing but a cup of hot soup or milk taken for three hours before. The urine must be examined before every injection. The site of injection is prepared with alcohol or tincture of iodine. After injection the patient can usually return home in a few hours' time. If any of the relative contra-indications be present she should be kept under observation for the night.

The treatment of gonorrhœa is the subject of the latter half of the pamphlet.

THE SERBIAN RELIEF FUND.

The following trained nurses have left recently to join the Serbian Relief Fund Unit 6, on the Salonica Front: Misses Elsie Bull, Grace Butler, Gladwys Davies, Enid Davies, Roberta Parsons, Jeannie Rankin, Beatrice Robinshaw, Isobel Wicks.

Professor W. J. Simpson, C.M.G., Vice President of the London Tropical School of Medicine, and Professor of Hygiene at King's College, London, &c., has left for Salonica, to take medical charge of the Unit.

OUR AMERICAN COUSINS ARRIVE.

THE LAKESIDE BASE HOSPITAL UNIT.

The arrival in this country of a Unit for an American Base Hospital (No. 4 U.S. Army) for active service with the Allies draws attention to the admirable method on which the Unit is built up. Doctors and nurses who have been already accustomed to work together in civil life can do so most smoothly in the novel and often difficult conditions of active service, and Dr. George W. Crile, of Cleveland, Ohio, shortly after the return of the Lakeside Unit from service at the American Ambulance, Paris, in 1915, proposed to the Surgeon General of the United States Army, the organisation of American Base Hospitals and Hospital Units for Military Service, in time of War, from existing Civil Hospital Organisations. A result was the inauguration of the Lakeside Base Hospital Unit.

The value of this organization was evident on the declaration by the United States of a State of War with Germany. On April 28th an advance notice of the impending mobilization of the Unit for Active Service was received, on May 5th Mobilization and Muster-in was started, on May 6th the Unit, with *personnel* complete, entrained at Cleveland; the following day it embarked at New York on the Cunard Line S.S. *Orduna*, and sailed the next for active service abroad. Professor M. A. Nutting and Mrs. Helen Hartley Jenkins were on board to wish them God speed.

Photo.] [*Bassano.*

MISS GRACE E. ALLISON, R.N. MATRON.

It is, to nurses, a happy coincidence that the first Unit to be despatched since the declaration of a State of War between the United States and Germany, should come from the Lakeside Hospital at Cleveland, where the late Isabel Hampton Robb, pioneer of nursing organization in the United States, great hearted and greatly loved, was, after her marriage, a member of the Board of Managers.

We are glad to know that on arriving at Euston the nurses of the Unit were officially welcomed by the Matron-in-Chief of Queen Alexandra's Imperial Military Nursing Service, the Countess of Airlie—representing Her Majesty Queen Alexandra—Miss Lloyd-Still, and Miss Cox-Davies, members of the Nursing Board. Miss Grace E. Allison, R.N., Chief of the Nursing Staff, was presented on arriving with a bouquet of roses, England's national flower. It was a happy symbolism, "As welcome as flowers in spring."

Miss Allison, like the other members of the Unit, is a graduate of the Lakeside Hospital and a registered nurse, and recently has taken an active part in securing a Nurses' Registration Act for Ohio on satisfactory lines. After holding various responsible positions elsewhere she was called back to Lakeside as Principal of the Nurse Training School. She early enrolled as a member of the American Red Cross, and she has further taken the two years' course at Teachers College, Columbia University which, together with her hospital training, enabled her to graduate with the degree of Bachelor of Science.

Miss Allison's Assistant is Miss Harriet L. Leete, and the Roster of Reserve Nurses (Active) of the U.S. Army Nurse Corps Company "A" includes Misses Ara R. Agerter, Mabel Allyn, Jennie B. Anderson, Anna C. Baughman, Isabel Bishop, Gertrude Blackman, Minnie J. Bowman, Helen M. Briggs, Elsie Florence Brower, Anna M. Carlton, Edith S. Carman, Betty Clara Connelly, Carrie B. Crites, Josephine Cunningham, Clara Dunlap, Nettie Eisenhard, Anna M. Ellis, Austa W. Engel, Elizabeth Folckemer, La Rue Frederick, Harriet P. Gillis, Lillian Grundies, Constance L. Hanna, Grace Hohl, Mabel Horn, Clara Illig, Margaret Lane, Hester Russel McFarland, Inez McKee, Mollie L. McKenney, Margaret McVitty, Elsie Magnus, Ruth Mason, Bertha Maurer, Irma R. Metzner, Augusta D. Militz, Martha M. Militz, Edith S. Morgan, Florence M. Nesbitt, Katherine MacD. Nicholson, Laura A. North, Helen J. O'Brien, Esther Martha Palmer, Daisy Elizabeth Perrine, Florence Perry, Lydia Emogene Reynolds, Cynthia Richardson, Mary Jane Roche, Ellen Mary Schultz, Marie A. Shields, Mathilda K. Siehl, Caroline Smith, Muriel Joyce Snow, Ina May Starr, Minnie Victoria Strobel, Evabelle Tatro, Marie I. Taylor, Margaret Tupper, Helen B. Van Meter,

Mary Lois Van Meter, Arvilla Walkinshaw, and Grace E. Young—64 in all.

Miss Allison brought with her introductions from Professor Nutting to Mrs. Bedford Fenwick, and on behalf of The British Journal of Nursing Miss Breay at once called to offer its greetings and welcome. Although the unit have been but a few days in London they have driven through the principal streets in char-a-bancs, worshipped at St. Paul's and Westminster Abbey, seen the river and the Tower, and visited the National Gallery.

On Tuesday, they visited, by invitation, No. 1 General Hospital (T.F.) at Camberwell. They were received by the Commanding Officer, Major Oswald, the Principal Matron, Miss Cox Davies, R.R.C., and the Matron, Miss Appleyard; and amongst those invited to meet them were Mrs. Bedford Fenwick, Miss Lloyd-Still, R.R.C., Miss D. Finch, R.R.C., and Lady Codrington, a member of the Standing Committee of the Hospital.

A pleasant little ceremony took place outside the principal entrance to the hospital, when Miss Allison introduced her staff to the Principal Matron and Matron, and then introduced Mrs. Bedford Fenwick to them, as well known throughout America for her work for the nursing profession, and as Editor of The British Journal of Nursing, with Miss Breay as Assistant Editor. Mrs. Fenwick, replying, expressed her appreciation of the honour conferred on her recently in the Hon. Membership of the American National League of Nursing Education. The nurses then divided up into groups, and were conducted by Miss Cox Davies, Miss Appleyard and the Sisters round the hospital, in the different departments of which they expressed much interest, and a very favourable impression of the care given to our sick soldiers. The hospital looked its best with the flowering shrubs—lilac, laburnum and may—in Myatt's Park in full bloom, the Recreation Huts for officers and men, and the recently-opened workshop were admired. In the kitchen, roasts of beef, war potatoes, and crisp and succulent salads were in course of preparation for the officers' dinner, under the supervision of the head cook, a Girton graduate.

The visit concluded with tea—served at little tables decorated with lovely roses in a charming hut—to which the guests sat down comfortably.

Before they separated the Commanding Officer, addressing the nurses, said he was delighted to see them, and expressed the hope that their work would interest them, and, on behalf of himself and Miss Cox Davies, wished them good luck.

The party then went on to another tea party with Mrs. Page, wife of the American Ambassador.

On Wednesday morning they were received at Marlborough House by Queen Alexandra, and at Buckingham Palace by the King and Queen. In the afternoon they visited St. Thomas's Hospital by invitation, and subsequently were entertained by Mrs. Whitelaw Reid, wife of the late American Ambassador to London, and Miss Allison and others attended the dinner given by Lord Derby to the American Unit, which includes twenty-one medical officers, with Major G. W. Crile as Director.

NURSING AND THE WAR.

The visit of the King and Queen to the Industrial centres in Lancashire and Cumberland must have been a most fascinating tour. It is good that they should see for themselves what a physical and mental strain the war entails on the people whose energy and health is being expended for the benefit of the Empire. With these strenuous workers our nurses are proud to be classed. The Queen paid many hospital visits and inspected the nursing staffs. At the Fazakerley Hospital, Liverpool, Her Majesty was received by those in high command. The Matron was presented and the nurses inspected.

On the 16th Their Majesties were in Manchester. The King stopped at the Salford Royal Hospital, and was received by the Secretary and Matron, and the Queen paid a visit to the Royal Infirmary, and was received by the Chairman, staff and Lady Superintendent. The Queen then proceeded to Heaton Park and inspected nurses, patients, motor ambulances, and drivers in the grounds.

The Western General Hospital was subsequently visited by their Majesties, and they afterwards drove through the city to the delight of the populace.

Will trained Naval and Military Nurses have Votes?

The Representation of the People Bill provides for granting votes to women at 30 years of age, on the same qualifications as men. One clause, 5 (1) states:—

"During the continuance of a war in which His Majesty is engaged and for a period of twelve months after the termination thereof, any person to whom this section applies shall be entitled to be registered as a Parliamentary elector for any constituency for which he would have had the necessary qualification but for the war.

This section applies to any person who in connection with the war is abroad and is—

(*a*) Serving as a member of any of the naval or military forces of the Crown, or

(*b*) In service of a naval or military character for which payment is made out of money provided by Parliament, or

(*c*) Serving in any work of the British Red Cross Society, or the St. John Ambulance Association, or any other body with a similar object.

The question is, are trained Naval and Military Nurses enfranchised under section (*b*)? We have applied to the Home Office for information, but so far have not received a reply.

There appears little doubt that V.A.D.s will be enfranchised under section (*c*). How about our indispensable civil Nurses?

Inkpot Honours.

The *Berliner Tageblatt* complains "that more Iron Crosses have been earned behind the inkpot" comparatively than awarded for "genuine" heroism under fire. That awarding this decoration to postal officials, ornamental members of the

staff, clerks, chauffeurs, paymasters and so on has greatly depreciated its value. Is it not the same with our Royal Red Cross? Why should it have been awarded to V.A.D. clerical workers and even showered upon nurses who have merely done routine duty in military wards? In the former case the once exclusive R.R.C. may well be termed an "inkpot" decoration. And when we see long service Matrons of large hospitals given a "second class" when clerical workers and V.A.D.s are awarded the R.R.C. first class, it is surely time to consider whether it is worth having at all.

The following quotation from Mr. Martin Swayne's "Mesopotamia" contains a very high appreciation of our nurses :—

"It was a singular spot to find a large number of women, away up in the heart of that elemental country of fire and water and earth. But they remained untouched by any kind of pessimism, nor were they greatly interested in the campaign as a military affair. All their interest was in their work. They were a wonderful stimulus. Where a man unwittingly tended to let things slide they exhorted and energised. In details, they did not seem to show that gradual decadence that creeps imperceptibly over men when isolated and overworked. It is perhaps so subtle that it takes a woman to detect it. Women may be theoretically unscientific, but they are essential to the maintenance of the scientific spirit and practice. Naturally they suffered sickness, but not nearly so much as one might have expected; for discipline plays a tremendous part in the avoidance of sickness. It is not so much a physical factor as a moral one. It seemed possible to induce a practice of going sick very easily, and in that climate it was only necessary to permit some inner act of surrender that escapes simple definition, but resembles the lowering of a dog's tail, and one becomes a sick man. It was not exactly malingering." . . . .

"Shortly after we left Amara, the news came that Sir Victor Horsley had died. It was in a season of extreme heat, when death comes suddenly in many forms. Eighty officers attended his funeral in columns of fours, the most junior in front. He had a coffin. Wood was precious in Amara. There were some other bodies sewn up in blankets. A long, dusty march of a mile to the cemetery, a shallow earth grave, a brief ceremony, the same for all, and a weary tramp home in the sun—that was the final picture. There is one detail to add, and that is the lovely playing of the "Last Post" over the graves. In him we lost the finest surgeon in Mesopotamia."

. . . .

"Towards the end of July, there were day temperatures of 124 degrees in the shade, and the wind, when it blew, seemed as if it had passed over a burning city. It was impossible to do anything save what was absolutely necessary. The sickness amongst the medical staff became rather serious, and at times we had to look after far more cases that we could treat adequately. But in these moments of temporary dislocation, the presence of nurses made all the difference, and that state of confusion that had existed in Basra never occurred."

HER MAJESTY THE QUEEN INSPECTS NURSES AT THE FAZAKERLEY HOSPITAL LIVERPOOL.

FRENCH FLAG NURSING CORPS.

BY OUR SPECIAL CORRESPONDENT.

Miss Florence Morris, a member of the first Canadian Unit, has been transferred from Lisieux to Ambulance Mobile I, now situated in Belgium. The work at this hospital greatly appeals to the nurses, although the Matron, Miss Warner, carefully warns Sisters who wish to join the staff that they must be ready to put up with any difficulties. We are glad that these skilled Sisters are being utilised for such important work.

The Directrice-Générale of the F.F.N.C., when on a tour of inspection, heard the following conversation between two French medical officers.

MISS ELLISON AT VERDUN.

The one was enthusiastic about the way his hospital was working, thanks, he added, to the help of his English nurses. He then went on to say how skilled workers like the nurses simplified the work of a hospital. "You can ask them to do the dressings, without once undoing them to verify if they are done properly."

Ever since Miss Ellison's visit to Liverpool, the Women's War Service Bureau, Liverpool, has sent monthly very valuable consignments of things, dressings, shirts, &c., for the French soldiers. They are very grateful, for their letters of thanks are sent by the F.F.N.C. Sisters; and in one case one of the recipients of a shirt enclosed his photo with his letter of thanks. Some of the Liverpool gifts were sent to Verdun, to be distributed amongst the underground hospitals in that almost ruined city which Miss Ellison visited. In these hospitals are accommodated only those patients who can go no farther. Poor souls brought to die out of the danger of further shells! A stepping-stone between the battlefield and eternity! How tenderly they are cared for by doctors and orderlies—(there are no women at Verdun itself)! but the pathos of it all is the hospital where patients are brought to die, they die often even before any relief can be given to them! Poor souls! some so young and splendid! The hushed cellar wards, the faint light, the sufferers' groans—who could ever see these sights and not bear the horror of it to one's grave.

Dr Bailleul, the celebrated Paris surgeon, whose interesting hospital at Troyes is one of the "Show" hospitals in France, has paid a pretty compliment to the F.F.N.C. by asking for an equipe of twelve nurses to carry on the great work he is doing. Not only is he busy with big surgery, but the re-education of the patient, the re-utilisation of the lost or useless limb begins before his treatment is considered finished. The F.F.N.C. will do its best to supply this demand, but owing to the present restrictions no more nurses can leave the country. It seems a thousand pities, especially when one sees face to face the enormous good the nurses can do, not only in the care of the wounded, but by showing to our ally what we expect of nurses—professionally or morally.

What this little pioneer corps has achieved will perhaps one day be revealed. Meanwhile its members are content to hide their light under a bushel. Yet slowly but surely the seeds sown with such difficulty are now bringing forth fruit and the nurses have not only the gratitude of the patients but the appreciation of the doctors themselves. At the beginning of the war, when the corps was in its infancy, the question of the nurses ranking as officers was a very sore point with the administration. Even the ladies of the Red Cross ranked as *sargeants* and had non-commissioned officers' food. Now, not only are the ladies of the Croix Rouge given the rank of officers with first class railway fares and officers' mess, but the temporary corps of nurses instituted by M. Justin

Godart—to provide nurses with at least three months' training—have the rank of officer. Quite recently at Talence, where Miss Nairne is Matron and where several women have the benefit of a short English training with the F.F.N.C. Sisters, one of the French staff died. She was given an officer's funeral, and the English Matron was chief mourner. It was a very touching ceremony and the médicin chef's brief address and farewell to the dead "officer" brought tears to the eyes of all those present.

Paris this week is crowded with visitors. Not only have Parliamentary representatives of the Allied nations come to shake the hands of their French brothers and wish them Godspeed, but a medical congress or mission of eminent medical men have come to see what the genius of France has devised for the re-education of its mutilated and blind soldiers. Amongst them the writer saw Sir Thomas Oliver, Surgeon-General Russell, Dr. Campbell McLure. Dr. Dundas Grant, who has gone to Lyons to study M. Herriot's work, and Lord Charnwood is also here studying the transport of wounded men. What curious times we are living in! Moments of unending sadness! And the long procession of blinded soldiers led in by mothers or young wives, handsome blinded officers who never again could see the sun and flowers and all the beauty of the land of France, for the salvation of which they had given more than their lives, brought tears to the eyes of the eminent medical men sitting there in congress. How many of them are now fathers of blind sons! How many of them may be so before the war is ended! But with true British courage they brushed away the tears, bent their bodies forward in order to listen better to what France was doing to give these poor heroes a fresh start. There is so much we British can learn from the great creative genius of France and at last we seem to have awakened to this fact, whilst for years Germany has been stealing the master brain without the slightest hesitation and organising it against the land whence came this knowledge. The French are the greatest chemists in the world. The Huns themselves acknowledge it, yet Germany has for years worn the "Laurels" in the eyes of all the world because she has so skilfully stolen and organised the great master discoveries that come from France.

Quite apart from the services it has been the privilege of the skilled Sisters of the F.F.N.C. to render the soldiers of France, their reward in coming daily in contact with the minds and methods of eminent French doctors must bear fruit in future. Said one Sister who long ago has freed herself from the restrictions of the hospital for the independence of the district nurse, "I am making out, as it were, a new book of recipes and shall institute many of them in my district when I return." The true pioneer spirit of Scotland and the true spirit of the nurse.

CARE OF THE WOUNDED.

RECREATION FOR THE WOUNDED.

One of the most useful bits of work that can be done for convalescing and disabled soldiers is to divert their thoughts from the horrors of the past and the problems of the future, so in many war hospitals wise and clever friends have encouraged the convalescents to take up fancy work and basket making as a recreation, and also as a means of making a small amount of money.

In the Governors Hall at St. Thomas's Hospital on Thursday, May 17th, there was an exhibition of the work of patients in the Fifth London General Territorial Hospital, both regimental badges embroidered in coloured silks which were on show only, and also many attractive and saleable articles, which, in spite of the wet day, found a ready sale.

Amongst the badges on view may be mentioned that of the Buffs, embroidered by Lance-Corporal Hutchinson (Albert Ward). In the centre was a green dragon on a yellow background, and underneath, in white letters on a blue ground, the motto, "Veteri Frondescit Honore." Below, the words "The Buffs," in red letters on a yellow ground. Enclosing the whole was a laurel wreath entwined with a blue scroll on which were inscribed the names of the actions in which this regiment has played so glorious a part.

Another notable badge was that of the London Scottish (Hut F), which was most effective. In the centre in red was the lion rampant, surrounded by a circle forming a blue background for the words "London Scottish" and "Strike sure." This again was surrounded by a wreath of thistles carried out in green and mauve. Underneath were the words, South Africa, 1900–1902.

Private W. Smith (Hut F) also sent the Badge of the Lancashire Fusiliers, a sphinx, worked in grey on a red ground. Private Smith was wounded in the Battle of the Somme.

Sergeant Prebble (Hut B), of New Zealand, sent a New Zealand Badge, a Stag's Head, surmounted by a crown, bearing the words Kia Toa, and surrounded by a wreath of New Zealand fern.

Sapper Sutherland (Hut E) chose the Badge of the Royal Engineers—the Royal monogram, surmounted by a crown, and surrounded by the words, "Honi soit qui mal y pense" and a laurel wreath.

Private Tyler (Hut B) sent the Badge of the Northumberland Fusiliers, depicting St. George mounted on a white horse, slaying the dragon.

The Notts and Derby (Sherwood Foresters) was another interesting device.

Amongst many attractive articles for sale were reproductions in needlework of pictures from "Our Hospital A.B.C.," which caused so much amusement when it made its appearance. In the Recreation Hut a number of patients were busily engaged in making baskets. Indeed so great is the demand for these that Mrs. Herbert, who is in charge, stated not only were no baskets for sale, but no orders could be taken at present.

THE REPORT OF THE SUPPLY OF NURSES COMMITTEE.

The report of the Committee appointed by the Army Council to inquire into the supply of nurses has been issued as we go to press, and can be obtained from Messrs. Wyman, Bream's Buildings, Fetter Lane, E.C. The Committee as finally constituted consisted of Mr. Bridgeman, M.P. (Chairman), Lord Knutsford, Sir Frederick Treves, Mr. Francis Curzon, Captain Boulton (Queen Mary's Hostel for Nurses), Mr. Morris (Secretary, London Hospital), Miss Becher (Matron-in-Chief, Queen Alexandra's Imperial Military Nursing Service), Miss Sidney Browne (Matron-in-Chief, Territorial Force Nursing Service), Lady Airlie, the Matrons of Guy's, Royal Free, St. Thomas's, and St. Bartholomew's Hospitals, the Lady Superintendent, Royal Infirmary, Edinburgh, and the President of the Poor Law Matrons' Association, and Mrs. Furse (Commandant-in-Chief, Women's V.A.D.). Lord Knutsford resigned when the Committee was reconstructed, and later Sir Frederick Treves resigned, and was replaced by Sir James Fowler. Representatives of the Irish Nurses' Association and the Admiralty were subsequently added.

The terms of reference of the Committee were to ascertain "the resources of the country in trained nurses and women partially trained in nursing so as to enable it to suggest the most economical method of utilizing their services for civil and military purposes." The following are among the recommendations of the Committee :—

Trained Nurses.

1. That no more trained nurses can be obtained for military hospitals from institutions managed by the public health, lunacy, or Poor Law authorities, with the exception of the institutions recognized by the Local Government Board as training schools, or from district nurses, school nurses, or health visitors.

2. Small auxiliary hospitals should be restricted to the treatment of convalescent cases. No new hospital should be set up with less than 40 beds.

3. Secure all available probationers from training schools as they complete their full training.

4. Aim at a maximum proportion of one trained nurse to 14 beds in ordinary hospitals, and one to six beds in private hospitals for officers.

5. Appeal to private nurses, their employers and associations to volunteer for war work, offering compensation where there is serious financial loss, and securing a return of the nurses to their former position at the close of the war.

6. Ask the Dominions if they can provide an additional number of trained nurses, but abstain from recruiting in the United States* or other foreign countries.

7. In a case of emergency employ probationers (including V.A.D. members) as nurses under a sister where they are approved by the matron-in-charge.

8. Increase the staff of all military hospitals, so as to ensure regular leave and more relaxation where required.

9. Give a bonus for every six months of service in military hospitals, with an increment of £1 for each period of six months after the first—to be paid on termination of service.

10. Provide better pensions in cases of permanent breakdown due to war service.

For Trained and Untrained Nurses.

11. Provide transport in covered conveyances where nurses have to live at a distance from the hospitals where they work, and in camp hospitals.

12. Insist on better accommodation for nurses where it is now inadequate. Provide a matron-inspector to look into the condition of all war hospitals.

13. Promise recognition of satisfactory service for all nurses working in all hospitals receiving sick and wounded soldiers.

14. Provide in all cases travelling expenses at reduced fares.

For Untrained Nurses.

15. Provide cost of medical examination for all probationers, including V.A.D. members.

16. Relieve them of expense as regards uniform.

17. Furnish additional allowances where required for necessary expenses of members in V.A.D. hospitals.

18. Grade V.A.D. members so as to distinguish those who have had 13 months of approved service.

19. Establish hostels where V.A.D. members may reside and hear lectures, and from which they can go for daily training in civil hospitals.

20. Appoint a matron-inspector of V.A.D. Auxiliary and Private Hospitals for each Command in the United Kingdom, whose reports should be submitted through the Commands to the War Office for final action.

21. Make arrangements that the trained matron should be in charge of the nursing staff in V.A.D. Auxiliary Hospitals.

General Recommendations.

22. Bring all the nursing authorities into touch by establishment of one central committee to act as a clearing house during war time.

23. Encourage the making of a census of all women suitable for nursing, and willing to undertake it for the period of the war.

We shall discuss this Report next week after due consideration.

* The report is dated January 24, 1917—before the entry of the United States into the war.

A hen enters a ward at Bath War Hospital and lays an egg daily in a soldier's locker. The soldier, lying in bed, draws aside the curtain to enable the hen to enter her curious nest.

Will this patriotic hen receive the R.R.C. ?

THE NURSES' PETITION TO THE PRIME MINISTER.

GOVERNMENT BY CONSENT.

The Nurses' Petition is going to be a big success. It goes straight to the root of good government, and simply asks for professional enfranchisement for the organised members of the Nursing Profession, so that they may help to make the Constitution by which they will be controlled in the future.

It is only tyrants and sycophants who claim, or are content, with any other form of government.

To neither of these classes do the Constitutional Registrationists belong.

The Petition expresses their aspirations, and should, and we feel sure it will, appeal to a democratic Government.

Our enemies are also sure of it. Hence the bluster and sophistical inaccuracies in last week's employers' press.

An infuriated onslaught appears in the *Nursing Mirror*, which apparently emanates from Bedlam, and whilst carefully omitting to print the Petition, it implores its readers to send the writer a postcard "stating her wish to add her name to the Trained Nurses' Protest Against, and Her Reprobation of the Attempt to Mislead the Prime Minister, as to Actual Facts, Feelings, and Wishes of the Overwhelming Majority of British Nurses." This rodomontade is addressed to "every intelligent British Nurse throughout the Empire!"

We should like to see the faces of overseas Nurses when they read it. They are not usually classed with the Gadarene swine. One thing we promise the easily-recognised writer of this ribald invective—the Prime Minister and our legislators shall see it. Tabulated with other gross attacks made upon working nurses, through the hospital governors' press, it will convince the most lethargic legislator how imperative is protection for the members of the nursing profession from intimidation by those who exploit them through the pseudo-professional press. We cannot imagine more cogent argument in favour of self-government for Nurses, which the Petition invites, than the series of articles which have appeared for months past in the Burdett publications.

An Inaccurate Statement.

The *Nursing Times*, another lay-governed publication, makes the inaccurate statement that "A Petition is being circulated among members of the nursing profession, in which they are asked to oppose any other Bill than that promoted by the Central Committee for the State Registration of Nurses. This means direct opposition to the Bill drawn up by the College of Nursing, Limited, the principles of which are entirely in accord with those of the Central Committee, the difference being in method of procedure," and refers its readers to Miss Rundle, the secretary of the College of Nursing, for information!

The Nurses' Petition.

The following is the text of the Nurses' Petition to the Prime Minister:—

I, the undersigned, petition that any Bill for the State Registration of Trained Nurses, brought in by the Government, or otherwise, shall provide for the direct representation of the Organised Societies of Nurses in England and Wales, Scotland, and Ireland on the Provisional Governing Body authorised by Parliament to frame the Rules and Regulations to which the Registered Nurses will have to conform, as provided in the Bill drafted by the Central Committee for the State Registration of Nurses.

It will be seen that the statement made by the *Nursing Times* that members of the nursing profession "are asked to oppose" any Bill is not true. What they are invited to do is to support the principle of self-government. If this means "direct opposition to the Bill drawn up by the College of Nursing, Limited," the sooner the College of Nursing, Limited, redeems its written pledge to provide for "self-government" for its nurse members on the Provisional Governing Body set up in its Bill the better!

But this is just what it declines to do.

This is not "a difference in method of procedure." It is a fundamental difference in principle. Our Petition asks for government by consent. The College intends to govern us without consent. No amount of specious misstatements upon the part of the employers' press will mislead convinced registrationists on this point. We know what we want and we are out to fight for it, and we are neither to be intimidated nor deluded by those who have no right to express an expert opinion on nursing affairs.

The More the Merrier.

Two nurses have written to know if members of the College of Nursing can sign the Nurses' Petition to the Premier for direct representation on the Provisional Council, should a Bill for Nurses' Registration be introduced. Of course they can, and several have already done so. The College programme includes a promise of direct representation and self-government for the nurses; and if it does not provide for this principle *in its Bill*, it is breaking faith with those nurses who have joined under this promise. The more members of the College who sign this Petition the better, and let them inform their present Council of their reason for doing so. It is very little use to grant representation after the Rules are made and must be obeyed.

The Petition will be found ready for signature on the inside cover of this issue. It can be signed at the Office, 431, Oxford Street, London, W.1, and forms will be sent free to Matrons and Nurses upon application to the Hon. Secretary, Nurses' Petition, at the same address.

"SLUR ON THEIR PATRIOTISM."

Miss Mary Macleod Moore—the eminent Canadian journalist, Chairman of Council of the Society of Women Journalists—has done the nursing profession in this country great service in placing before the public in this week's *Sunday Times*, just what we professional nurses feel about the appeal for charity made upon our behalf by the College of Nursing, Ltd., in this time of national need and agony. Under the heading of "Ladies of the Lamp," "Slur on Their Patriotism," Miss Macleod Moore touches the right note every time. "Like the silent Navy," she writes, "the British Nurse does not advertise.

"Quietly, unostentatiously, without roll of drums or blowing of trumpets, she goes on her busy round of healing the wounded and the sick, comforting the dying, and listening to the last words of the men far from their kith and kin. She is one of the bulwarks of the nation in peace as in war. . . .

"They ask nothing from the public but independence, justice and a decent living wage—yet, in their name, and without the sanction of many organized nurses' societies, charity has been demanded for them.

"Charity is an ugly word, and there is no other."

Miss Macleod Moore proves that *now is not the time* for the College of Nursing to beg for benevolence for nurses when thousands of our sick and wounded need help.

She touches on economic conditions and compares the poor pay of military nurses in Britain with that of Canadian, Australasian, and New Zealand war nurses, and trenchantly remarks, "Raising a fund in connection with the College of Nursing does not strike at the root of the matter."

This excellent article concludes—

"Many hospital committees—with a few exceptions composed entirely of men—are supporting the College, and their matrons and nurses generally follow suit. No one doubts the good intentions of those promoting the College of Nursing and the benevolent fund, but the former would be of more genuine value and would receive wider support if the nurses themselves had a powerful voice in organizing their own profession, and shared the responsibilities which are calculated to touch intimately their economic condition."

THE COST OF THE WAR.

We hope those who in our name have appealed for benevolence for the "Nation's Nurses" have read Mr. Henderson's estimate of the cost of death and disaster resulting from the war.

Here are the figures :—

Killed and wounded, forty-six millions.

Killed, seven millions.

Expenditure, nine thousand million pounds!

Imagine the impoverishment of the world by this waste of life and labour, and the appalling destruction of material. Imagine the fatherless and widows, and the shattered and broken men. What is it going to cost to touch only the fringe of alleviation in connection with all this tragedy?

And the war is going on.

Who that has health and strength and a sufficiency has a right to claim comfort or any other luxury?

Not the "Nation's Nurses." Why are they to be classed with the daughters of the horse leach?

Let us hope that if the College of Nursing cannot carry on its self-imposed task without the money of the charitable, it will shut up until the "Nation's Nurses" see fit to ask after the war for an Endowment for Higher Education to extend their usefulness to the community. During the world's struggle against Kaiserism, the nurses are receiving a very liberal education in the humanities. Let it suffice.

OUR CRUCIFIED.

For us He died,—
For you and me;
For us they died,—
For you and me.
That love so great be justified
And that Thy Name be magnified,
Grant, Lord, that we
Full worthy be
Of these—our loved—our crucified!

THE IRISH NURSING BOARD.

APPROVED BY THE ROYAL COLLEGE OF SURGEONS IN IRELAND.

A Meeting was held on May 18th in the Royal College of Surgeons, Ireland, to form a Board to carry out the approved scheme for the improvement of the Nurses' education in Ireland. Mr. William Taylor, President, was in the chair.

The Royal College had appointed its four Representatives on the Board, namely :—

Mr. William Taylor, President of the Royal College of Surgeons, Ireland.
Sir Arthur Chance, F.R.C.S.I.
Right Hon. Michael F. Cox, P.C., M.D.
T. Percy Kirkpatrick, Esq., B.A., M.D., F.R.C.P.I.

The following certificated Nurses were elected by Ballot, and have consented to act :—

Miss L. Bradburne, Meath Hospital.
Miss Bradshaw, Royal Hospital for Incurables.
Honble. A. Brodrick, Ballincoona Caher Daniel.
Miss E. Hezlett, Richmond Hospital.
Miss M. Huxley, Elpis, Lower Mount Street.
Miss J. Jordan, Mercer's Hospital.
Miss K. Kearns, Nurses' Insurance Society Section.
Miss M. Keating, National Maternity Hospital.
Miss N. McArdle, Dublin Castle Hospital.

Miss M. O'Flynn, Temple Street Children's Hospital.
Miss A. M. Phillips, Dr. Steevens' Hospital.
Miss A. Carson Rae, 34, St. Stephen's Green.
Miss L. Ramsden, Rotunda Hospital.
Miss A. Reeves, Royal Victoria Eye and Ear Hospital.
Miss A. Rhind, Cork Street Fever Hospital.
Miss V. Roberts, 48, Lower Mount Street.
Miss E. Sutton, St. Vincent's Hospital.
Miss M. Thornton, Sir Patrick Dun's Hospital.
Miss D. West, North Dublin Union.

The Board met after the election was declared and unanimously elected the President of the College of Surgeons Chairman of the Board.

Miss Carson Rae was appointed to act as Hon. Secretary.

The next Meeting of the Board will be held on May 31st to consider the Bye Laws.

The following is a draft of the scheme which was submitted for approval.

Approved by the Royal College of Surgeons in Ireland.

The Royal College of Surgeons in Ireland, being desirous of assisting the public to distinguish between competent and incompetent persons who act as Nurses, and of promoting the welfare of Nurses, propose the following scheme :—

That a Board, to be called "The Irish Nursing Board" (approved by the Royal College of Surgeons in Ireland) be constituted. (Hereinafter called "The Board.")

Objects.

(1.) To promote the education of Irish Nurses.

(2.) To examine such persons as shall have received an education that the Board shall consider sufficient.

(3.) To grant certificates to such persons as shall have passed the prescribed examination of the Board.

(4.) To make and to maintain a Register of such persons as shall have received the certificate of the Board.

(5.) To remove from the Register, if thought fit, the name of any person who shall be convicted in England or Ireland of any felony or misdemeanour, or in Scotland of any crime or offence, or who shall be judged by the Board to have been guilty of grave misconduct in any professional respect.

The Board.

The following persons, or such of them as are willing to act, shall meet together and elect from their number twenty-two persons, who, together with four representatives elected by the Royal College of Surgeons, shall constitute the first Board.*

The Board so elected, shall continue in office for one year after the Register has been declared by public advertisement to be open.

Within one month before the expiration of such time a new Board shall be constituted as follows :—

Four representatives elected by the Royal College of Surgeons in Ireland for such period as the College shall from time to time decide : and twenty-two other persons, whose names are on the Register of the Board.

These twenty-two members shall be elected by ballot by the persons whose names are on the Register of the Board.

The eleven members of the Board who have received the smallest number of votes at their election shall go out of office three years after the first election, and shall be eligible for re-election. (In case, owing to an equality of votes, more than eleven members have received the lowest number of votes, the selection of the person or persons to retire, among those who have received such equality of votes, shall be decided by lot drawn by the Chairman.)

All other members of the Board, save the representatives elected by the Royal College of Surgeons, shall serve for six years, after which they shall be eligible for re-election.

The Register.

Up to May 31st, 1918, all persons who can satisfy the Board of their competence as Nurses, and who are otherwise proper persons, shall have their names placed on the Register on payment of a fee of one guinea (£1 1s.).

From June 1st, 1918, to May 31st, 1919, all persons who shall have completed their training before the end of one year after the opening of the Register, who can satisfy the Board of their competence as Nurses, and who are otherwise proper persons, shall have their names placed on the Register on the payment of a fee of four guineas (£4 4s.).

After this period, those persons only who hold the certificate of the Board, granted after examination, shall have their names placed on the Register on the payment of a fee of one guinea (£1 1s.).

Procedure of the Board.

Fourteen members of the Board shall be necessary to constitute a quorum.

At the first meeting the Board shall proceed to elect one of its members Chairman.

The Chairman, so elected, shall hold office for one year.

After the election of Chairman, the Board shall proceed to draw up a draft of the By-Laws and Standing Orders that shall govern the procedure of the Board and its Committees.

Such draft of the By-Laws and Standing Orders shall not be valid till approved by the Royal College of Surgeons in Ireland.

Any subsequent alteration in the By-Laws and Standing Orders, so adopted and approved, must be passed by a clear majority of the whole Board and then be approved by the Royal College of Surgeons in Ireland before such alteration shall be valid.

* Here followed list of names.

HAMMERING OUT AN INSTRUMENT.

In a debate in the House of Commons on Monday on the Government's proposal of a Convention of Irish representatives to consider Home Rule, the Prime Minister explained that the proposal was "that Ireland should try her own hand at hammering out an instrument of government for her own people."

We take it that is exactly what the Irish nurses and doctors are doing in forming the Irish Nursing Board to organise their nursing affairs. We shall watch their proceedings with keen interest, wish them all success, and no further meddle therein.

We are asked to contradict the statement made in the *Nursing Times* last week that the editor received the above draft scheme "from the hon. secretaries (the Misses M. Huxley, M. O'Flynn, A. Carson-Rae, L. Ramsden, A. Reeves, and V. Roberts)." With one exception none of these ladies knew that the document had been sent as it was considered confidential until brought before their meeting held at the Royal College of Surgeons on Friday, the 18th inst. It is to be hoped they will receive the apology which is their due.

MENTAL NURSES AND REGISTRATION.

We cull the following paragraph from the annual report of the Asylum Workers' Association:

"The scheme of legislation by the College of Nursing, Ltd., for the State Registration of Nurses has also engaged the anxious attention of the Executive Committee, and in conjunction with the Medico-Psychological Association (who for more than a quarter-of-a-century have carried out a complete and uniform scheme of training, examination and registration for Asylum Nurses, male and female, throughout Great Britain and Ireland and some of the Overseas Dominions), they have claimed for Mental Nurses, as a matter of right, equality of privilege with nurses trained in ordinary hospital work. The position at present is somewhat complicated, owing to an amalgamation having been agreed on by the College of Nursing and the chartered Royal British Nurses' Association, which is now awaiting the decision of the Privy Council, but whatever may be the upshot, trained Mental Nurses (of both sexes) may rely upon the support of this Association to secure their just rights with regard to equitable representation on the body controlling registration and other matters affecting their interests, should any project of legislation be brought forward."

Queen Alexandra visited the London Hospital on Monday to open the Queen Alexandra Nursing Home for sick nurses, and, during her visit, presented the Royal Red Cross to the Matron, Miss Lückes.

NATIONAL UNION OF TRAINED NURSES.

VOLUNTARY WAR REGISTER FOR NURSES.

Owing to Lord Derby's appeal for Nurses for the War Office, it has been decided to close the Register conducted by the National Union of Trained Nurses, which has been at work ever since August 8th, 1914, during which time some thousands of nurses have passed through the books. Miss E. M. Pye was Secretary of the Union when war broke out, and she promptly called an Emergency Meeting of the Executive Committee, who decided unanimously "To offer the use of the Office as a clearing house for the registration of trained nurses, and for societies and institutions requiring their services."

In a very short time interviewing Matrons were appointed in London, and all over Great Britain, and thanks to the energy of Miss Pye, the machinery of the only professional mobilization of nurses for war was soon in working order.

A large number of nurses immediately applied. Every nurse was interviewed by a professional woman, and references were carefully taken up, only fully trained nurses being sent abroad.

The following points are worthy of record. One is, that a society of nurses was ready and able, at a time of national emergency, to rapidly mobilise the unorganised nursing force of the country.

Another is, that such a professionally conducted register managed by women who know the requirements and who are, moreover, anxious to help nurses in every way, has proved itself to be greatly appreciated by both institutions and nurses. And, finally, we testify to the generous and self-sacrificing way in which nurses, at that time, offered their services voluntarily, or in return for infinitesimal salaries, asking only that they might be sent where the need was greatest.

The Union will gladly continue to advise Colonial and other nurses who write to or call at the Office, 46, Marsham Street, Westminster, S.W. 1.

NEW APPOINTMENTS.

Cirencester Red Cross Hospital.—Miss N. C. Iles (Sister).

Exeter V. A. Hospital.—Miss M. Godwin (Sister).

Sutton Red Cross Hospital.—Miss A. Jameson (Sister).

Private Post.—Miss Brender.

A SAD DISASTER.

A very sad disaster was reported from New York on Tuesday that the *Mongolia* (Atlantic Transport Line), with a hospital unit on board, returned to port with the bodies of two nurses, Mrs. Edith E. Ayres, of Chicago, and Helen Wood, of Evanston, Illinois. They were killed by a shell explosion during target practice. Another was seriously injured.

APPOINTMENTS.

MATRON.

Victoria Cottage Hospital, Kington, Herefordshire.—Miss A. M. Beedie has been appointed Matron. Miss Beedie was trained and held the position of Sister at the Withington Infirmary, Manchester, and has had a varied nursing career. She was Sister at Queen Charlotte's Hospital for four years, and was a member of the Nurses' Co-operation, New Cavendish Street, for five years; after which she held the position of Matron at the Somerton Hospital for Accidents, and of the Aberdeen Maternity Hospital. She nursed in the Seychelles, in connection with the Colonial Nursing Association; and has also done war nursing.

SISTER.

Royal Infirmary, Perth.—Miss Jean A. Cobban has been appointed Sister. She was trained at the Falkirk Infirmary, and had held the position of Sister at the Belvidere Hospital, Glasgow, and at the Morningfield Hospital, Aberdeen.

METROPOLITAN ASYLUMS BOARD.

EXAMINATION, APRIL, 1917.

The following is the list of successful candidates who passed the recent Examination of the Metropolitan Asylums Board:—

1. *Staff Nurses.*—A. Thomson, H. Elwin, M. Hardy (Park).

2. *Probationers.*—M. Page, F. M. Tufnail (S.W.); E. Laidlaw (W.); D. W. Cottle, B. M. Russell (N.W.); K. F. E. Kohler (N.E.); D. Clifford (P.); H. C. Smith (E.); M. E. Taylor, M. O. Aitken (W.); D. M. Williams (P.); F. B. Brown (N.W.); M. F. Clark (W.); M. Peacock (P.); W. R. Stevens, A. R. Thomas (W.); M. E. Sporle (E.); C. E. Waller (W.); E. C. Simkins (P.); E. Cumberland (N.E.); S. M. Wallace, G. K. Conquest (W.); D. L. Chamberlain (S.E.); H. L. V. Spicer (W.); L. I. Lerpiniere (S.E.); M. E. Salter (N.E.); L. Cloonan (P.); E. D. Joyce (E.); G. M. Neal (P.); L. M. A. Edwards (N.E.); H. L. Walden (P.); A. S. Baillie, L. Hall (E.); E. Gunning, E. E. B. Hicks (P.); I. Reid (S.E.); K. R. Hogan (P.); J. H. Gibson, A. F. Godwin (E.).

3. *Assistant Nurse (Cl. 1).*—L. Webb (J.G.).

4. *Assistant Nurses (Cl. 2).*—J. Blunt, H. A. Brookes, D. Copelin (N.E.); D. M. Medland (N.W.); M. F. Taylor, E. Hollister, B. Reid (N.E.); N. O'Mara (N.W.); D. V. M. Pepler (G.); M. Newson, L. M. Watson (N.E.); M. L. Blenkhorn (N.W.); E. J. Probert (G.); E. M. Bulwer (W.); A. M. Pantry (N.E.); C. A. Wright (G.); K. E. Norton (N.E.); E. A. Claydon (S.E.); E. M. Venn (N.W.); B. L. Wood, A. M. Pope (G.); D. M. Joyce, A. M. Wright (N.E.); B. M. Hunt (S.E.); L. C. Cooper (N.W.); E. M. Azulay (S.W.); A. A. M. Geddes (W.); E. Crowley (N.W.); E. F. Bailey, E. M. Collyer, E. E. Benson (G.); H. Davies (N.W.); D. Timlin (S.W.).

NURSING ECHOES.

On Wednesday, 16th inst., the thirteenth annual general meeting of King Edward's Coronation Fund for Nurses was held at 73, Lower Leeson Street, Dublin. The chair was taken by Lieutenant-Colonel William Taylor, President of the Royal College of Surgeons. Apologies for non-attendance were received from Miss Reed, Sir William Fry, J.P., D.L., Sir Algernon Coote, and Mr. Thomas O'Farrell, J.P., who sent a donation of £5 5s. towards the fund.

The adoption of the annual report was moved by Mr. Beattie, D.L., who urged better payment for nurses of all grades. He believed that next to national school teachers they were the worst paid class in Ireland.

Mr. John Mooney, C.V.O., D.L., in seconding the resolution, endorsed what had been said by the proposer.

The Chairman, in putting the resolution, referred to the inadequate pay of nurses generally, and suggested the advisability of their joining some scheme whereby they might have a sickness and old age fund.

A cordial vote of thanks was unanimously passed to the Chairman and to Mr. Beattie, D.L., for his continual help to the Society.

There is no more interesting report of District Nursing than that of the Visiting Nurse Association of Chicago—which is at once so human, so professional, and so efficient. The report of the Nurses' Committee states that a visit to a patient does not simply mean entering the home and giving the patient nursing care prescribed by a physician—it often means the solution of some difficult home problem; seeking a position for an indolent father or son; or arranging to send a number of children to school, or, possibly, to suitable work after first teaching them how to keep clean.

The nurses on the staff have averaged 86 during the past year, ten more than during the previous year. They are assigned districts under six supervisors. It is interesting to note that eight of the nurses are supported by industrial organizations, whose employees receive their services in the factories, and in the labourers' homes, and 17 were supported by the Metropolitan Life Insurance Co., to whose sick Industrial Policy-Holders the Visiting Nurse Association gives care.

The Committee reports that it is constantly impressed, not only with the executive ability of the Superintendent, Miss Edna L. Foley, but with her untiring and beneficial interest in each

BOOTS PURE DRUG COMPANY LIMITED

WERE PIONEERS IN THE WAR ON GERMAN TRADE.

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Compressed Tablets.
ASPIRIN Boots (Acetylsalicylic Acid B.P.)
(grs. 5).
Equal in every respect to the original Bayer Aspirin, and at Pre-War Prices.
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PHENACETIN & CAFFEIN Boots
(grs. 4). (gr. 1).
In Bottles of **25** and **100.**

Compressed Tablets.
SODIUM SALICYLATE B.P. Boots
(grs. 5).
Guaranteed Pure.
In Bottles of **25** and **100.**

Compressed Tablets.
HEXAMINE B.P. Boots (Urotropine).
(grs. 5).
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REDUCED PRICES

IN order to decrease the large stocks in the Nurses' Department, we are NOW selling Nurses' Cloaks, Bonnets, Hats, Frocks, Underwear, etc., at REDUCED PRICES.

If you cannot call, be sure and write us for particulars immediately, and take advantage of these Special Reductions.

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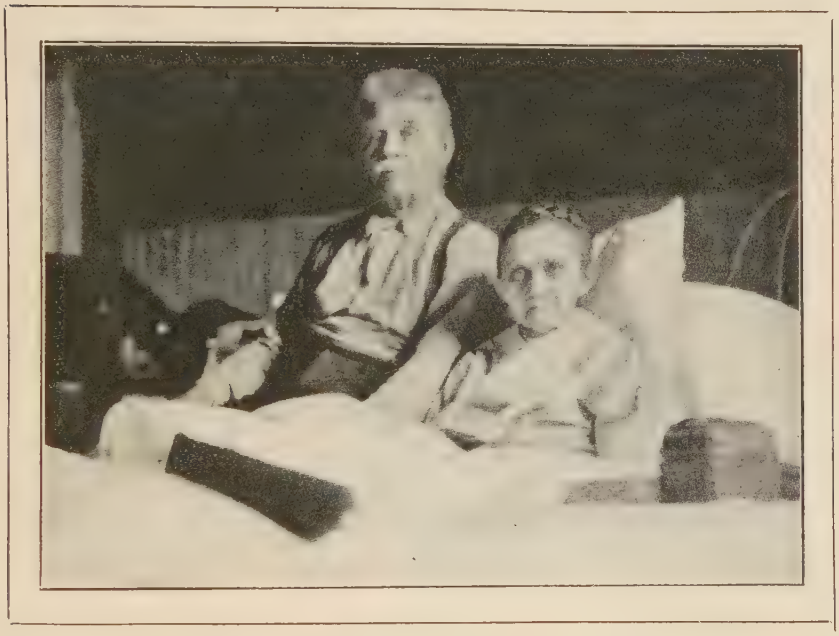
nurse, so that she requires and maintains a standard of nursing obtained by few, if any, other organizations of the kind.

Our picture shows a devoted old couple. He is wage earner, housekeeper, and nurse, in the tiny attic home. She has been an invalid for four years.

The Modern Hospital (Chicago and St. Louis) announces that its June issue will be devoted to the subject of Occupational Therapy and Occupations for the Handicapped. The importance of this subject has not been sufficiently realized until comparatively recent times. Of late the nations at war have come to recognize the therapeutic and economic necessity of providing suitable occupations for those of their wounded and injured who are able to work. This necessity is just as urgent in the case of the handicapped class in civil life.



A DEVOTED OLD COUPLE.

Another important feature of the June issue of *The Modern Hospital* is to be a paper prepared by Miss Alice F. Bell under the auspices of the Department of Nursing, Teachers' College, Columbia University, on the standardizations of records in training schools for nurses. This is work for which there has long been a crying need. It is believed that the system outlined in this paper will be of epoch-making importance in nursing education.

Dr. G. Gushne-Taylor, writing in the current issue of *Medical Missions at Home and Abroad* from Tainan Hospital, Formosa, says :—

"During the past year we instituted in the hospital the 'Order of the Bath.' A small bathroom has been built for the men, and one improvised for the women, and five baths have been installed. Before embarking on this venture the men patients were asked, provided we built a bathroom and supplied hot water, would they be willing to pay three sen a bath. They were delighted at the proposal, and at first a system of bath by ticket was used, but though the patients bought several hundred tickets, we have given it up for a better plan. The price of their stay in hospital has been raised by two sen a day. In return for this each patient on admission is presented with a cake of soap and a new towel valued at ten sen. For the rest we provide hot water for the bath. I must admit we were surprised at the eagerness with which they used the baths. The rooms are in almost constant use. Even out-patients ask if they may not be allowed to come in for medicated baths without the necessity of staying as in-patients. It means greater cleanliness for the patients, and often shortens their stay in hospital. Sometimes a patient is admitted in an extreme state of filth; before entering the ward he is given a hot bath —a great advance out here.

"Our first man who experienced the blessings of washing by immersion was the means of giving me extreme pleasure. He was the first Formosan I had personally seen in a bath in our hospital. He had a skin disease, and needed steeping in medicated water. The bath was prepared, and an assistant led along the victim to his fount of cleansing. Our patients' wardrobe is not a very extensive affair, but what garments this one had were on him. Picture him standing at the end of a bath looking at the yellow water in the tub. 'Now what am I to do?' he asks. 'Take off your clothes

and get in.' He removes his lower garments and enters the water standing. 'Take off your coat.' The coat is removed. 'And that other bit of a band.' He still stands. 'Now sit down in the water, right down.' He kneels, and finally is persuaded to lie down covered by that health-giving sulphurous fluid, and he vigorously applied soap and cloth for half an hour. 'Have you ever been in a place like that before?' 'Never!' He liked the operation and had it repeated ten times, when he went home a happier, wiser, and cleaner man."

BOOK OF THE WEEK.

"THE SHINING HEIGHTS." *

The story tells of the son of a prosperous medical man who, after long residence abroad in estrangement from his father, returns to find the familiar house in the hands of strangers.

A shabby manservant replies to his enquiries.

Dr. Harding had had to leave his practice some years ago.

"It didn't get into the papers, though there was terrible trouble. I didn't understand the ins and outs of it, but it seemed the doctor had tried an experiment on one of his patients—a lady—a Mrs. Bryce—and the lady died. Other medical gentlemen were called in. I heard they were very severe, and in the end the doctor had to go."

The son traces his father and arrives to find him on his deathbed. He was in a state of extreme poverty and neglect. "A single blanket covered the figure to the waist. It was worn and threadbare and yet the limbs scarcely showed beneath their outline. On the edge of the bed was a thick pile of manuscript, neatly ordered ; one fleshless hand rested flat upon it in an austere gesture of authority."

This manuscript set forth the calculations of the specific for the cure of tuberculosis, the experiment of which had cost Mrs. Bryce her life, and ruined his reputation.

He died shortly after his son's arrival, and Peter Harding sat far into the night by his father's dead body studying the manuscript. He was himself no mean bacteriologist.

A few years later there was much excitement in a remote Cornish village because a large and lonely house called "Lone Point" was let, after being empty for some years. It was a great event for the Vicar and his daughter Genifer. The Vicar was chiefly disturbed because he would now have to pull himself together and write decent sermons. Genifer because she was at first unable to place the man and woman. Were they brother and sister? Were they husband and wife? The Vicar's qualms were set at rest for they proved most unconventional people and religion did not form part of their lives.

Genifer's first encounter with her showed her to be a beautiful girl, who carried her beauty with a rare simplicity. She was hatless, stockingless, coatless. Her bare feet were thrust into old tennis shoes—symbolical of the casual conventionality of her whole appearance. Neither the cotton blouse open at the neck, nor the rough tweed skirt was fashionable or even decently new.

She was the wife of Peter Harding, whom he had married under unusual circumstances. Lone Point was opened as a Sanatorium where Peter Harding carried out the experiments which had begun to mature in his father's brain, when they ended so disastrously. He had married Lillah chiefly because she had taken an interest in his scientific pursuits. Haumann, the monkey on whom he tried his experiments died, but this did not deter him from pursuing the treatment on the unlucky creatures who had placed themselves under his care.

In the death of Miss Jones, one of his patients, his career comes to an end, and he knows himself beaten, and owns his failure to the little *demi-mondaine*, one of his patients.

"It isn't a cure. I've believed in it, and in myself, till the very last. Perhaps another man might have succeeded, but I hadn't the experience. I've meddled with a thing that was too big for me, and others have paid the penalty.

Peter Harding left the Sanatorium surreptitiously, and Earnshaw, who has always loved Lillah, would fain persuade her and himself that Peter is dead. The faithful Genifer who had been betrothed to Earnshaw before the advent of Lillah, however in the end we believe, is in sight of her long-delayed happiness, and Lillah is re-united to her husband. The story, as a whole, is not a very convincing one, the descriptions of the life in the Sanatorium being wildly improbable.

H. H.

* By I. A. P. Wylie. London: Mills & Boon. Price 6s.

"SONG OF LIFE."

I ask no more of youth
Than the sun and blue o'erhead,
With the grass-lined road before me,
By wind and fortune led.

I ask no more of age
Than the peace that comes with night,
Stretched on the earth forgotten,
With the stars above alight.

(*From "Song of Life," by Henry Simpson.*)

COMING EVENTS.

June 7th.—Society for the State Registration of Trained Nurses. Annual Meeting. Medical Society's Rooms, 11, Chandos Street, Cavendish Square, London, W., 4 p.m. Tea after the meeting by the kind invitation of Mrs. Walter Spencer, 2, Portland Place, W.

LETTERS TO THE EDITOR.

Whilst cordially inviting communications upon all subjects for these columns, we wish it to be distinctly understood that we do not IN ANY WAY *hold ourselves responsible for the opinions expressed by our correspondents.*

USEFUL AND FRIENDLY HELP REGRETTED.

To the Editor of THE BRITISH JOURNAL OF NURSING.

DEAR MADAM,—The National Union of Trained Nurses has been so useful and friendly in the past that we feel a real regret that this department of the pleasant offices in Westminster is no longer open to help us out of our difficulties in the future. Our consolation must be the knowledge that its various members can continue to use their characteristics and experience to great advantage in other fields.

Yours faithfully,
B. M. BENTHAM,
Sister-in-Charge.
The Fourth Auxiliary Hospital,
Moseley, Birmingham.

ANTI-PARASITIC VESTS.

To the Editor of THE BRITISH JOURNAL OF NURSING.

DEAR MADAM,—I have read the article on Anti-Parasitic Vests, and should be obliged if you could give me the address where I could get all particulars for making them. The working party in this village would be glad to work if they had a pattern of these vests.

Believe me, yours truly,
EVA K. THOMSON.
The Pool House, Groby, Leicester.

[As we have received several letters of enquiry we beg to refer the writers to the Editor of the *British Medical Journal*, 429, Strand, London, W., who may be able to give the information required. —ED.]

SIGN THE PETITION FOR GOVERNMENT BY CONSENT.

To the Editor of THE BRITISH JOURNAL OF NURSING.

DEAR MADAM,—Can you give me any information regarding the legality of the manner in which the guineas are being gathered from some nurses in support of the proposed College of Nursing, Ltd.

I recognise the right of anyone to ask money for any purpose, but not to bring undue pressure to induce payment. Statements are being made to the effect that the Honble. Arthur Stanley has sufficient interest to carry his Bill through Parliament, and that nurses who do not join now will find themselves in a very awkward position on the Bill becoming law. These statements have no foundation, and are likely to mislead the unthinking.

I should also like to know the meaning of the word "Representative," is a Matron ex officio an accredited representative of her nurses' opinions ?

FAIR PLAY.

[We regret we cannot give an opinion on the legality of the method of collecting guineas from nurses by the College. The statement that if nurses do not join the College Register before an Act is in force, they will be under great disability, and will have to pass an examination at once, is not true. They need have no fears on that score. Parliament will provide in the Act for a period of grace for nurses, as it did for doctors and midwives in their Acts, when nurses in practice and of good character will have the *right* to register, after which time it is hoped a Central Examination by an independent Board will be enforced, without exempting the larger London hospitals. We do not consider a nominated person, matron or otherwise, represents any opinion other than her own. Miss Sparshott's claim at a recent meeting of the N.U.T.N. at Manchester, that the Matrons should "control" the College of Nursing, although the nurses pay for its upkeep, is very autocratic and untenable. All certificated nurses who desire to see a just and democratic Nurses' Act in force should sign the Petition to the Prime Minister, promoted by the Society for the State Registration of Trained Nurses on the inside of front cover in this isue.—ED.]

PLEASE STATE A CASE.

To the Editor of THE BRITISH JOURNAL OF NURSING.

DEAR MADAM,—Do you consider it right or seemly that Military nurses should accept gifts from their patients ? I have seen such presentations reported in the papers several times, and it seems entirely undesirable, in my opinion, that either officers or Tommies should make gifts to the nursing staff. Such gifts were forbidden in every civil hospital in which I have worked, and rightly so. Please state a case.

Yours truly,
MATRON MILITARY HOSPITAL.

[The case seems quite simple. We disapprove of hospital nurses in either civil or military hospitals accepting gifts from patients, because it places the former in a dubious position. Soldiers of all ranks are the most generous of men—the most chivalrous and grateful in their relations to women. We can imagine with what pleasure they would subscribe to give a popular Sister or nurse a parting gift, but we think such presentations should be strictly forbidden by military authority, so that a desirable standard of discipline can be maintained. It is not *convenable* to accept gifts from those dependent upon our professional services.—ED.]

OUR PRIZE COMPETITIONS.

QUESTIONS.

June 2nd.—Explain what is meant by blood pressure.

June 9th.—Name some of the causes of the great mortality in infants, and how to prevent them.

The Midwife.

POST GRADUATE WEEK.

GENERAL LYING-IN-HOSPITAL, YORK ROAD, LAMBETH.

The Post Graduate week at the General Lying-In Hospital, York Road, opened on May 21st, with its customary delightful hospitality. The Matron and Sister Olive welcomed their guests in the entrance hall, where the tables were set for tea, the weather being too uncertain to have it in the garden as usual.

After tea the visitors were allowed to wander round the wards at will, and talk to the smiling mothers and admire their very fascinating babies. There was one proud mother with twin sons, "Jellicoe" and "Haig"; she observed that she thought she had done her "bit" for her country. She certainly had. Another mother with a single son, her first child, had her cup of happiness marred because his daddy could not see him, he being paralysed in a hospital in France, and "he can't write, you see."

The sweetest of the babies was motherless, the poor girl had died of eclampsia.

At 5 o'clock Dr. Fairbairn lectured on "Delayed Labour." It was, he said, a difficult subject, as there was great difference of opinion as to when interference became necessary. It was not the obvious cases which were the difficulty, but those in which the cause for delay was not clear. Those cases which only differed a *little* from the normal. In the vast majority of cases delay in the second stage was from inefficient power.

Sometimes it would happen that with a large child and a small pelvis the child would be born all right because the uterus was relatively strong.

Sometimes with narrowness of pelvis there was weakness of power; both factors came in to account for delay. It would depend on the observation of the midwife throughout labour as to the character of the pains, &c., to determine how much the delay was due to either or both of these causes.

Dr. Fairbairn referred to "Twilight Sleep," and said that in some cases of nervous patients it actually hastened labour, as it was well known that in nervous subjects the anxiety, worry and distress often frightened the pains away, and the quietude it produced actually hastened the labour. He said it should be remembered that any form of morphia given in the last stages when the head was low down would be likely to affect the child. As a working rule it should not be given from 4 to 6 hours before the expected birth.

TUESDAY, MAY 22ND.

The second day started with the Ante-Natal Clinic at 9 a.m. Owing to limited accommodation only a small number of midwives could be admitted but as it is held daily during the week, all in turn will be able to avail themselves of this valuable experience.

At 11 a.m. after a welcome cup of tea, the party divided into two companies, one going to the Clinic in the wards, conducted by the House Physician, and the other attending the Demonstration on Museum Specimens, in the lecture hall, conducted by Sister Olive.

Two interesting caess at the Clinic were an adherent placenta case and one of albuminuria of pregnancy. In the latter case there were three causes which might have accounted for albumen in the urine: Pressure from twin pregnancy, systolic murmur, and kidney trouble. As, after delivery, the albumen disappeared, it was determined as albuminuria of pregnancy.

Sister Olive's Demonstration was characterised by her usual attractive method of imparting instruction. She described the development of life from its very earliest beginnings. Her lecture, she suggested, should be called "The Wonders of Life."

With the aid of diagrams and specimens she traced the growth of the embryo and the foetus through the days, weeks, and months until full term.

In the afternoon the party again divided into two, half visiting Queen Charlotte's Hospital, where they had a most interesting time, and were hospitably entertained to tea. The other party went to the Jewish Maternity Home, and Infant Welfare, in Whitechapel, a special notice of which will appear in a future issue. At 6 p.m., the midwives again assembled in the lecture room at York Road to listen to a lecture from Sister French on the care of baby after the tenth day.

She said it was now rather a burning question as to who should be responsible for ante-natal care, and the after-care of babies. She hoped midwives would try to work in sympathy with other organisations. It was a great loss to infant clinics if they did not receive any report from the midwives, and much time was wasted in consequence, in finding out the history of the baby.

Sister French gave many valuable suggestions for the hand-feeding of infants, about which, as she said, so much controversy rages.

POUND DAY.

A pound day is being organised by the Ladies' Committee and the Staff of the Hospital, on Thursday, June 7th, at the General Lying-in Hospital, York Road, S.E. A pound in money, a pound of coppers, pounds of groceries such as tea, coffee, cocoa, sugar, jam, rice, maize flour, soap, soda, fruits, potatoes, beans and peas, all will be welcome. No donation is too small to be gratefully received. Funds are low and the cupboard bare.

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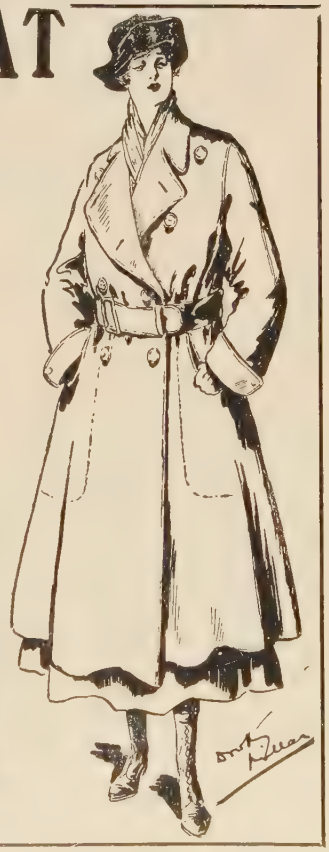

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A CHARTER OF MOTHERHOOD.

The Memorandum on the National Care of Maternity, issued by the Women's Co-operative Guild, is, we have no hesitation in saying, the most interesting that has ever been published on the subject. The Guild, which interviewed Lord Rhondda, President of the Local Government Board, to urge the immediate establishment of a Ministry of Health, is of opinion that it is vital to the welfare of the country that an enlightened and generous care of maternity should replace the present indifference and neglect. They show how working women, during the months of pregnancy, often go out charing and washing to put by for the time of confinement; how a woman goes without food to provide for her husband and children; how she washes and dresses the children till the last minute before childbirth; cooks meals she is too tired to eat; and does all her own housework. The workers ask for a maternity allowance for all women below the old income tax allowance of £160, for the establishment of a Public Health Service of Midwives, who should be secured a salary of £150, supplemented by Home Helps, unassociated with the Poor Law, or with inquisitorial methods, that dinners should be provided based entirely on the health needs of mother and child, not as charity, but as medical treatment. In short, they know and have shown, where the shoe pinches.

CENTRAL MIDWIVES BOARD.

At the Examination of the Central Midwives' Board, held on May 1st in London and the Provinces 477 candidates were examined; and 386 passed. The percentage of failures was 19.

LIST OF SUCCESSFUL CANDIDATES.

LONDON.

British Hospital for Mothers and Babies.—J. Melliss, G. L. Phillips.

Clapham Maternity Hospital.—C. M. Alderman.

City of London Lying-in Hospital.—E. M. Castwood, E. F. Cook, L. Davies, N. O'Dwyer, A. T. C. Olsen, E. Orchin, K. White.

East End Mothers' Home.—E. M. Chapman, H. Dalton, D. E. Little, C. Mitchell, E. M. Mitchell, A. M. Mittell, N. Palmer, E. J. Shepherd, C. Shilcock.

Edmonton Union Infirmary.—D. V. Barclay, W. S. Osborn, M. E. Seaward, I. C. Sieverdink.

General Lying-in Hospital.—D. Beagarie, I. M. Bosley, E. M. Crossley, E. J. E. Davies, R. M. Entwisle, C. B. Hale, N. E. Howes, C. E. Knight, E. A. McReddie, E. F. V. Mangelsdorff, H. M. Moyers, K. F. Mugliston, E. M. Paxton, E. E. Payne, G. E. Ramsdale, B. L. Rayner, S. L. Readhead, E. L. E. Rendell. A. M. Roy, A. S. A. Saville, D. E. Shute, C. E. Turner, L. V. Turner, D. M. Wright.

Greenwich Union Infirmary.—T. Nugent, M. J. Jagg.

Guy's Institution.—G. M. Franklin, E. G. Hopkins, M. B. Lockwood, I. W. Longbourne, M. A. Smith, A. M. Taylor.

Hackney Union Infirmary.—B. M. Barford, D. Dillon, C. Riley.

Kensington Union Infirmary.—E. M. Pratley.

Lambeth Parish Workhouse.—E. Downs, M. C. E. Lockeyear, B. M. Whittle.

London Hospital.—E. G. Chalmers, E. M. Crocker, S. J. Davies, M. E. Gray, R. B. E. Hall, A. E. Jones.

Maternity Nursing Association.—I. S. Bartrum, E. K. Gillett, L. Hall, A. S. Hiscock, M. J. M. Jones, J. White.

Middlesex Hospital.—A. C. Carlyle, F. M. Fletcher, M. N. Jones, S. G. Landon, A. Schut.

New Hospital for Women.— E. B. Mace, F. E. Prested.

Plaistow Maternity Charity.—R. E. Ayton, C. B. Baker, D. E. Baker, A. Barrett, G. Beaumont, K. F. Berry, F. E. Betts, E. L. Blackler, M. I. Brinnand, F. L. Brown, N. Brown, P. G. Churchill, A. C. Clapp, L. Darby, R. E. Darch, M. N. D, Edmunds, E. Eke, L. L. Elliott, A. Garside, D. M. Greenfield, M. M. Hawkins, F. E. Hayward, M. S. Hitchcock, E. Holden, E. Jordon, E. M. Lang, H. Morris, A. M. Mosley, E. M. Moxon, B. E. Naylon, L. M. Patrick, A. M. Payne, M. J. Peters L. M. Piles, M. Pride, E. L. Searle, E. Sharrat, R. E. Smith, E. S. Stockley, E. E. Taviner, C. E. Wroth.

Pemberton Nursing Institute and New Hospital for Women.—C. Reeves, C. A. Webb.

Queen Charlotte's Hospital.—M. F. Bruce, A. C. Chamier, C. V. Chevallier, F. G. Clark, D. Crane, M. C. F. Edwards, F. Hobson, M. Hodgson, E. C. Imray, M. B. Jones, A. Kennedy, A. Phillips, G. C. A. Sadler, G. G. Staplee, M. C. A. Steward, C. M. Sutton, M. E. Thomlinson, W. R. Warrener, E. M. Wenham, A. M. Werder, C. E. Wheeler, D. Wilson, E. E. Worvell.

Salvation Army Mothers' Hospital.—E. L. Hart, J. E. Parsons, M. A. A. Pleasant.

St. Bartholomew's Hospital.—L. P. Duffett, G. Hancock.

St. Marylebone Workhouse Infirmary.—L. W. Barrett, E. B. Scanlon.

St. Thomas' Hospital and General Lying-in Hospital.—I. H. Brown, A. M. J. Carolan.

South Western Maternity Home and Kensington Union Infirmary.—M. E. Cartmell.

University College Hospital.—A. D. Black, E. Pinnell.

PROVINCES.

Aldershot, Louise Margaret Hospital.—J. Buchan, C. M. V. Carroll, M. B. Johnson, E. Wale.

Aston Union Workhouse.—M. M. Murphy.

Birkenhead Maternity Hospital.—E. C. Fallows, A. M. Pugh.

Birmingham Maternity Hospital.—E. Allott, M. J. Francis, R. J. Gibbins, W. E. James, E. Keighley, M. Lunt, H. MacDonald, H. L. B. Millington, A. E. Quarrell, E. A. Shortland, E. R. Whewell, E. Williams, L. E. Wray.

Birmingham Workhouse Infirmary.—E. Harper, F. R. Roberts.

Blackburn Union Workhouse.—A. Barrett, B. Roskell.

Brighton Hospital for Women.—E. Parker, M. Trafford.

Bristol General Hospital.—L. T. Bowen, C. E. Cook, K. Logan.

Bristol Royal Infirmary.—L. Bowden, K. Fyans, E. Hilder, M. A. Pearse.

Cheltenham District Nursing Association.—F. E. Browning, J. Dicking, J. McFadden, B. A. Owen, C. M. Webster.

Chester Benevolent Institution.—A. Eyre.

Derby, Royal Derbyshire Nursing Association.—E. J. Clark, M. A. Crowe, V. I. Dawe, E. Heathcote, M. J. Lake, C. Marshall, I. H. Porter, A. Riches.

Devon and Cornwall Training School.—E. J. Crahart, G. L. Ferris, R. Martin, A. Richards, B. Walsh.

Essex County Cottage Nursing Society.—F. A. Brophy, J. M. Catmull, S. I. Crampton, L. Northway.

Gloucester District Nursing Society.—A. F. Archer, F. A. Miles.

Hastings District Nursing Association.—V. Atkin, E. F. Bailey.

Herts County Nursing Association.—G. Carter, F. Foster, L. A. Harper, E. M. Whiting.

Hudddersfield District Nursing Association, and Huddersfield Union Workhouse.—L. Spooner.

Kingswood District Nursing Association.—D. Thorpe.

Leeds Maternity Hospital.—L. C. Buckle, E. Richardson, A. Smith.

Leicester Maternity Hospital.—K. Corcoran.

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